PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

YK1-0004-C

CLAIMS AS FILED - PART I SMALL EN (Column 1) (Column 2) TYPE											OTHER SMALL	
TOTAL CLAIMS			þ				Γ	RATE	FEE	l	RATE	FEE
FOR			NUMBER	ILED	NUMBI	ER EXTRA	E	BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			minus 20=		* _		Ī	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 = *					X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, e					r "0" in c	olumn 2	L	TOTAL		OR	TOTAL	750
CLAIMS AS AMENDED - PART II							SMALL E	ENTITY	OR	OTHER SMALL I	THAN	
_	<u> </u>	(Column 1) CLAIMS	1 1 2 2	(Colur HIGH		(Column 3)	Г	SWALL	ADDI-		SWALL	ADDI-
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE_
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18≃	
	Independent	*	Minus	***		=		X42=	,	OR	X84=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEI	PENDEN	T CLAIM			+140=		OR	+280≈	
							L	TOTAL		OR	TOTAL	
		A	DDIT. FEE	<u> </u>	JOI1	ADDIT. FEE	ļ					
		(Column 1) CLAIMS	1	(Colu		(Column 3)	1 -		ADDI-	1 1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***				X42=		OR	X84=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEI	PENDEN	CLAIM		」	+140=		OR	+280=	
		*		en e			Ĺ	TOTAL			TOTAL	
		(Column 1)		· · · (Colu	mn 2)	(Column 3)	Α	DDIT FEE			ADDIT. FEE	<u> </u>
		CLAIMS	1	HIGH	HEST	(Column 3)) r		ADDI-		r	ADDI-
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=]	X42=			X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM] -	7,42-		OR	7042	
* If the obtay in column 1 is less than the optay in solumn 2 write "0" in column 2										OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
**		mber Previously Paper Previously Pa					er fou	nd in the and	oropriate ho	x in co	lumn 1	